This portion MUST be returned with	n your payment to ens	ure reper credit. THANK	PROJECT ID
This portion MUST be returned that	PROJECT NAME	(man)	\$470035
ACCOUNT BILLED	ITM MINE		
DUE DATE ANNUAL FEE \$ 150  TAX ID OR SOCIAL SECURITY #	Permittee requests an inspection to close out this permit.	Address RECEIV	ED
DIVISION OF OIL GAS AND MINI 1594 WEST NORTH TEMPLE SU PO BOX 145801 SALT LAKE CITY UT 84114-58		E-Mail Address  DIV. OF OIL, 2/65 &  Phone	MINING  ke check payable to:  Gas and Mining